CAMPAIGN FINANCE REPORT STATE OF WISCONSIN GAB-2

COMMITTEE IDENTI	<i>IFICATION</i>	`	
Filing Period Name:	July Continuing 2012		OFFICE USE ONLY
	Covers all activity from 05/29	9/2012 through 06/30/2012	12.7
Name of Committee/Corporation:	Sandy Bakk for Assembly	Sandy Bakk for Assembly	
Street Address:	et Address: 6611 Meredith Way		GAB ID: 0105385
City, State and Zip:	McFarland, WI 53558		~~
SUMMARY OF RECEIPTS	AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS			
1A. Contributions (Including	ng Loans) from Individuals	\$500.00	\$500.00
1B. Contributions from Co	mmittees (Transfers-In)	\$0.00	\$0.00
1C. Other Income and Co	mmercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS	(Add totals from 1A, 1B and 1C)	\$500.00	\$500.00
2. DISBURSEMENTS			
2A. Gross Expenditures		\$27.00	\$27.00
2B. Contributions to Com	mittees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS	(Add totals from 2A and 2B)	\$27.00	\$27.00
CASH SUMMARY			
Cash Balance Beginning	of Report*	\$0.00	
Total Receipts		\$500.00	ס
Subtotal		\$500.00	ס
Total Disbursements		\$27.00	ס
CASH BALANCE END OF	REPORT*	\$223.00	D .

(Balance at the Close of This Period-3A)

(Balance at the Close of This Period-3B)

INCURRED OBLIGATIONS

LOANS

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer:	Signature of Candidate or Treasurer	Date:
Bakk, Curtis		Daytime Phone:

\$0.00

\$0.00

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

^{*}Cash Balance as reported by committee

SCHEDULE 1-A

RECEIPTS Contributions From Individuals

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
Monetary							
06/29/2012	Bakk, Curtis G	6611 Meredith Way, McFarland, WI 53558	Cardiac Perfusionist	St. Mary's Hospital	700 S. Park St., Madison, WI 53715	\$250.00	\$250.00
06/19/2012	Bakk, Sandy	6611 Meredith Way, McFarland, WI 53558				\$250.00	\$250.00
					Sub Total	\$500.00	
			1	Total Unitemize	ed Contributions	\$0.00	
			T	otal Anonymou	us Contributions	\$0.00	
Grand Total					\$500.00		
Non-Monetary (-):					\$0.00		
Loan Forgiven (-):					\$0.00		
					Total	\$500.00	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Date	Full Name	Address	Amount	YTD
		Grand Total	\$0.00	
Non-Monetary (-):			\$0.00	
		Total	\$0.00	

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

Date	Full Name	Address	Amount	YTD
		Total	\$0.00	

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Monetary						
06/19/2012	Associated Bank Comment(s): cost of c	5220 Farwell St., McFarland, WI 53558	ccount		Bank Charges	\$27.00
					Sub Total	\$27.00
					Grand Total	\$27.00
				No	n-Monetary (-):	\$0.00
					Total	\$27.00

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Grand Total					\$0.00
Non-Monetary (-):					\$0.00
Registrant In-Kind Sub Total (-):				\$0.00	
				Total	\$0.00

SCHEDULE 3-A

ADDITIONAL DISCLOSURE

Incurred Obligations Excluding Loans

Complete Committee Name: Sandy Bakk for Assembly

Incurred Obligation Outstanding Amount: \$0.00

Date	Full Name	Address	Amount
		Grand Total	\$0.00

Date	Full Name	Amount Paid
	Grand Total	\$0.00

SCHEDULE 3-B

ADDITIONAL DISCLOSURE

Loans

Individual, Committee or Commercial

Complete Committee Name: Sandy Bakk for Assembly

Loans Outstanding Amount: \$0.00

Date	Lender Name	Address	Loan Amount	Loan Payment + Forgiven Amount	Outstanding Amount
				Grand Total	\$0.00